Application or Docket Number												nder ·	i
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003 /080/309													
CLAIMS AS FILED - PART I (Column 1) (Golumn 2)								SMALL I		OR	OTHE	THAN ENTITY	١
Ţ	OTAL CLAIMS		24					RATE	FEE	7	RATE	FEE	ĺ.
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
Ŧ	OTAL CHARGE	ABLE CLAIMS	24 minus 20=					X3 9=		OR	X\$18=		
iN	DEPENDENT C	LAIMS	<u>ش</u> ک	inus 3 =				X43=		OR	X86=		
×	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	<del>                                     </del>	OR			
• [	* If the difference in column 1 is less than zero, enter "0" in column 2								<del> </del>	OR		770	İ
1 30 06 CLAIMS AS AMENDED - PART II										<b>J</b> •···	OTHER		٠
	30 06	(Column 1)	m 2)	(Column 3)	٠.	SMALL	ENTITY	OR	SMALL				
AMENDMENTA		CLAIMS REMAINING AFTER AMENOMENT	·	HIGH! HUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	/
	Total	. 20	Minus	-2	0	- /		X\$ 9= ·		OR	X\$18=		ĺ
	Independent	• 3.	Minus	<b></b> 3	3	• /		X43=		OR	X86-		
	FIRST PRESENTATION OF MULTIPLE DEPEN			PENDENT	CLAIM			· -	<del>                                     </del>	·		~	l I
					•		l	+145=		OR	+290-		
			•	• •				TOTAL DOT, FEE		OR	ADDIT, FEE	Ø	
_	· ·	(Column 1)		(Cotum		(Column 3)							•
MENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 20	Minus	<b>-</b> 20	)	•	l F	X3 9=	<i>V.</i>	OE	X\$18=	·	
	Independent	• 3	Minus	- 5	5	• .		X43=/		OR	X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	TIPLE DEPENDENT CLAIM			<del>  /  </del>			3			
	•						L	+1454	/	OR	+290=	•	
•	•	•	•			•	A	DOTAL DOT, FEE	. / .	OR ,	ADDIT. PEE	,	•
		(Column 1)		(Colum		(Column 3)	,	· • •	••		•	· ·	
AMENDMENT C	464/07	CLAIMS REMAINING . AFTER AMENOMENT	•	HIGHE NUMB PREVIOU PAID P	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL PEE		RATE	ADOI- TIONAL FEE	
	Total	.20	Mirag	-02		- /	Ī	X\$ 9=		OR	X\$18=		
	Independent	<ul><li>ク</li></ul>	Minus	<b>-</b> (2)		•/	<b> </b>	X43-		. <b>.</b>	X86-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	~~~		
. ~	 		•				1	+145=		OR	+290-	<u>.</u>	
-1	I the "Highest Nur	nn 1 is less then the ober Previously Pai	d for the This	S SPACE is !	nës than	720. erter "20."	ســـ	TOTAL	•	OR ,	TOTAL DOTT, FEE		
1	I CHE LINES MANUAL MANUAL PROPERTY.	nber Previously Pa ber Previously Paid	POT UNITE	5 SP TLE B		11.655 1.			ropriste box			•	